

RURAL DISTRICT OF ST. GERMANS

The
Annual Report
OF THE
MEDICAL OFFICER OF HEALTH
FOR THE YEAR
1954.

P. J. FOX, M.B., B.Ch., B.A.O., D.P.H.

RURAL DISTRICT OF ST. GERMAN'S

THE

ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

FOR THE YEAR

1954



Digitized by the Internet Archive
in 2018 with funding from
Wellcome Library

<https://archive.org/details/b30126794>

To the Chairman and Members of the Council
of the Rural District of St. Germans.

Mr. Chairman, Ladies and Gentlemen,

On the information available to me the general state of health in the six County Districts in South-East Cornwall has been up to average during 1954, with a small worsening in the death rate being offset by a complete absence of maternal deaths, an improvement in the infant mortality rate, a lower incidence of infectious disease and a welcome improvement in figures for tuberculosis. In the memories of many of us the year 1954 will be recalled with little affection as one of cool, wet, sunless weather. It may be of interest that on the moors to the north of Liskeard the annual rainfall for 1954 was no less than 73 inches. It has been said that one of the main topics of our conversation in these islands is the weather, and many of us would like to attribute to our ever changing, and unpredictable weather at least some of the blame for the ills to which human flesh is heir. I feel myself that for the majority of us the main influence of climate and weather is psychological rather than physical. It is true that at the extremes of life adverse or severe climatic conditions, worsened perhaps by man-made pollution of the air can have a serious or fatal outcome. For most however and especially those whose livelihood or leisure time pursuits are dependent on weather, the main effect is on mood and outlook. What cricketer does not feel gloom and despondency at the prospect of a wet Saturday afternoon, and what farmer or gardener does not feel energetic, and enthusiastic when the sun shines, and crops can be tended or gathered in. We now believe that our mental attitude to the world about us has much to do with certain diseases, and with climate and weather having so much to do with our outlook, and being for some such an important part of their environment, it might be said that it has at least an indirect effect on our health. Beyond this I do not think we can go, especially in our temperate climate where physically injurious extremes of heat and cold are not experienced.

During 1954 the total estimated population of the Area fell slightly by 1,286 to a figure of 51,990. Of the constituent districts, St. Germans Rural District, Liskeard Rural District, Saltash Borough, Torpoint Urban District and Looe Urban District all showed small reductions in estimated population, and a small increase occurred in Liskeard Borough. The live birth rate at 15.5 per 1,000 of population was fractionally below last years rate, and is slightly above the national birth rate of 15.2. The still-birth rate at 25.0 per 1,000 total births is slightly above the rate of 24.0 for England and Wales, and is greater than last years rate of 19.0 per 1,000 total births in this Area. The total number of deaths, 697, shows an increase of 31 over 1953, but the death rate of 11.4 per 1,000 of population is only fractionally above the national rate of 11.3. It is pleasant to be able to report that no deaths attributable to pregnancy, and childbirth occurred in 1954. The total number of infants under 1 year of age dying in 1954 reached the record low figure of 13, giving a rate of 18.5 per 1,000 live births as compared with the national rate of 25.5.

As in previous years the most common cause of death was heart disease. It was responsible for 42% of all deaths in the Area. Cancer of all types was the next most common cause, being responsible for 19% of all deaths in the Area. Amongst heart diseases the most common type causing death was coronary disease and angina. Of the cancers the most common single cancer was that affecting the stomach. The average age at death 66 years for males, and 73 years for females approximated closely to the expectation of life in England and Wales as a whole. Of the 697 persons who died in the Area in 1954, some 318 or 45% were aged 75 years and over at the time of death.

In recent years the increased number of deaths due to cancer of the lung and bronchus has provoked much discussion of, and speculation upon possible causes of the increased incidence of these cancers. In particular much attention has been given to the possible role of tobacco in causing or being associated with these cancers, but no really indisputable or finally convincing evidence incriminating tobacco has been produced so far. Nevertheless the indirect evidence, largely statistical in nature, and increasing in volume as years go by throws grave suspicion on tobacco, especially if taken in the form of cigarettes in moderate or heavy quantity over a protracted period. It will probably be many years before sufficient evidence can be accumulated to fix the cause or causes of these cancers, but in view of their increasing toll of life it is hoped that before long some means of reducing, if not preventing their incidence will be found. I thought you would be interested in having figures showing the effect of this form of cancer in South East Cornwall, and for that reason I have gone through the records of deaths from this disease over the five year period 1950-54. The results of my investigations appear in the form of two additional appendices to this Report. The first shows deaths in actual numbers and sexes in the six County Districts, and in the whole Health Area. From this it appears that deaths from this cuase have been more numerous in 1953 and 1954 than in the previous three years. Except for the year 1950 the preponderance of male over female deaths, almost 3 to 1, was less than the ratio of 5 to 6 male to 1 female death which obtains in the country as a whole. The second appendix shows comparative death rates per 1,000 of the population in this Health Area, Cornwall County and England and Wales. From this it would appear that although the death rate has been increasing in all three cases, the relative number of deaths from cancer of the lung, and bronchus is less in this part of Cornwall, and in Cornwall County than in England and Wales generally.

In my Annual Report last year I expressed some concern about the relatively high incidence of new cases of tuberculosis in this Area. I am glad to be able to tell you of a considerable improvement in the position during 1954, when the total number of new cases notified fell to 39, a reduction of 24 on the figure for 1953. As far as individual districts were concerned, St. Germans Rural District, and Saltash Borough showed marked reductions, Torpoint Urban District had a moderate reduction, and Looe Urban District a small reduction. In Liskeard Rural District and Liskeard Borough there was a moderate increase in the incidence of the disease. The number of deaths from tuberculosis - 4 in all - is the lowest so far recorded in this Area, and represents a striking improvement on the average of 18 to 20 deaths from tuberculosis which occurred as recently as five years ago. My views on the possibility of the early eradication of tuberculosis remain substantially as stated in my last Annual Report, and I cannot yet share the views of those who believe that tuberculosis will very soon become as rare, and unusual as diphtheria now is. Much as we all welcome the reduction in the number of deaths from tuberculosis, I feel that this fact is sometimes over-publicised in an endeavour to show that the tuberculosis situation is improving generally. Laudable as our success in checking tuberculosis mortality may be, the real victory will not be won until whosesale eradication of the disease removes the possibility of infection.

As a step towards controlling and preventing tuberculosis, the scheme for the B.C.G. vaccination against tuberculosis of children in the school leaving age group i.e. those attaining the age of 14 years during 1954, got under way during the early summer. Of the 507 school leavers eligible for vaccination some 395 received B.C.G. vaccine, and have thereby been stimulated to produce some resistance to the disease. The percentage of parents who refused to have their children vaccinated was 3% - a commendably low figure, whilst absentees did not exceed 6%. We were interested to find a low percentage - 13% - of positive reactors to the pre-vaccination Mantoux test.

This latter finding suggests that school children in Cornwall are not exposed to a great deal of human or animal tuberculous infection. It also suggests that if these negative reactor children - about 80% of the school leaving population - who are devoid of any natural resistance to tuberculosis, had gone unprotected by vaccination into crowded city or urban communities where the level of tuberculous infection is usually higher, they might well have fallen victim to the disease. The relatively low degree of natural immunity disclosed by the scheme underlines the importance of present efforts to stimulate to production in these children of some artificial immunity or resistance to the disease through B.C.G. vaccination.

The incidence of infectious disease (other than tuberculosis) was light during 1954, the total of 706 cases representing a large reduction of the figure of 1917 cases in 1953. The most prevalent diseases were whooping cough with 496 cases, measles with 59 cases, pneumonia with 56 cases, and sonne dysentery with 54 cases. There were 4 cases of poliomyelitis, of which two were non-paralytic. One case only of food poisoning was notified. There were two deaths from whooping cough, both in infants under one year of age.

At the time of writing this Report, the news of a new and apparently successful vaccine against poliomyelitis is still fresh in our minds. This Salk vaccine has been prepared, perfected, and tried out on a large number of children in America, and preliminary reports suggest that it affords some protection against this disease. It is obviously much too early to form any reliable judgement of the efficiency of this newest weapon in the battle against poliomyelitis, and indeed within a very short time of the first announcement concerning the vaccine, reports of vaccinated children developing paralytic poliomyelitis have emphasised the need for caution in our approach to this subject. It would be too much to expect that the use of such a new, and relatively untried remedy would be free of pitfalls, and disappointments. In spite of, and perhaps because of such setbacks advances in knowledge, and technique will follow, and I feel the future in this field of disease prevention holds much promise. Up to now effective control of poliomyelitis involving as it did early recognition of cases, and close surveillance of, and control over contacts, was difficult if not impossible to establish. It must therefore be the earnest wish of all of us, that the efforts now being made to control, and prevent poliomyelitis by a suitable vaccine will be crowned with ever increasing success - such success as we have witnessed in the past 14 years in the wonderfully effective campaign against diphtheria.

I have written just now of the success of the immunisation campaign against diphtheria. The effect of this has been to almost completely banish this disease from our midst, and many of our younger parents will have little or no recollection of the period prior to 1941 when diphtheria affected tens of thousands of children, and caused hundreds of deaths. They may be tempted to think that diphtheria has disappeared for all time, and that immunisation is no longer necessary. At the risk of being considered tedious and repetitive, I must again warn parents of young children that if immunisation is neglected it may not be very long before diphtheria is again prevalent, and causing suffering, and deaths amongst children. It is most important that all infants be immunised against diphtheria by the time they are six months of age, and I hope parents of young babies will make every effort to see that this is done. The amount of pain and suffering associated with the three injections required is so trivial that no parent can reasonably put this forward as an excuse for delaying or neglecting to have this simple, but all-important procedure carried out. Moreover some protection against whooping cough can now be ensured through the same series of injections thus helping the young child to form its own defences against two diseases which previously took a heavy toll of infant life.

The welfare of old people, particularly those living alone, continued to cause anxiety during 1954. In most cases it was possible to persuade old persons who could no longer adequately care for themselves to enter a home or institution where they would be cared for. In one instance where an old lady of 75 years was found living in a large house under the most appallingly filthy and verminous conditions, and all effort at persuasion had failed, it was necessary to make an application under the National Assistance Act, 1948, Section 47 to a Court of Summary Jurisdiction for an order to compulsorily remove her to Lamellion House, Liskeard. After considering the evidence put before them the Magistrates made the necessary Order, and the old person was removed to Lamellion House. She remained there for some months apparently content, but following an attack of senile dementia had to be removed to St. Lawrence's Hospital, Bodmin, where she has remained.

Reasonably good progress in the provision of new houses continued in all parts of the Area during 1954. In spite of the large number of new houses built since the war, there is still an appreciable demand for houses particularly in urban parts of the Area. The position is easier in the two rural districts, where most demands for rehousing can now be met without great delay. Now that the main demand for rehousing has eased ones attention is being increasingly focussed on old, sub-standard houses either singly, or in groups, whose condition and state of delapidation is such that the only means of dealing with them is by closing or demolition. Many of the people who occupy these houses have up to now been overlooked in the anxiety to provide new houses for families living under even worse conditions, and the occupants themselves, many of whom are unable or unwilling to pay the higher rent of a new house, have not been very active in drawing attention to their unsatisfactory living conditions. Early in 1954 the Ministry of Housing and Local Government directed that local authorities should now take up as a matter of urgency, and after a lapse of some 15 years the question of slum clearance. All local authorities are now required to place before the Minister by August 1955 their proposals for dealing with slum areas, and we all hope that this will mark the beginning of a campaign to eliminate worn-out, unsound and unhealthy dwellings, especially where in urban areas these are crowded together in small courtyards, and alleys. Naturally accommodation will have to be found for those displaced from slum houses and this inevitably means the provision of more new Council houses to meet this specific need, in addition to whatever programme of new construction needed to meet normal demand. Whilst we all recognise and are anxious over the additional financial burden that slum clearance schemes will impose on national, and local finances, we cannot in justice provide up-to-date, and healthy housing for a part of the community and allow delapidated and unhealthy houses, without convenience or amenity to continue as dwelling places. This Area being mainly rural in character the concentration of slum dwellings is nowhere very great, and it should be possible to find a slower and more gradual solution of the problem than is possible in large towns, and cities.

In the field of water supply the principal event of 1954 was the constitution of the Liskeard and District Water Board. The primary task of this authority will be the supply of water in bulk to the Liskeard Rural District and the Borough of Liskeard. The latter authority has of course had an excellent supply for many years, and indeed the first part of the new Board's scheme is based on the expansion of reservoirs and treatment plant on St. Cleer Downs previously owned, and operated by the Borough of Liskeard. Water from the River Fowey will be collected at a point near Trekieve Steps, and will be fed by a large diameter intake main to the enlarged reservoir and treatment works at St. Cleer. From there it will be available for distribution over a wide area of the Liskeard Rural District, and perhaps in later years to adjoining districts if required. The scheme should prove of great benefit to the Liskeard Rural District where at present the inhabitants are dependent on small local supplies of doubtful or frankly poor quality, liable to fail in dry weather. As with rural electrification it should do much to

increase efficiency in, and remove some of the drudgery from the farming industry, and it might in some small way help to stem the drift of population away from rural areas to towns and cities. In other parts of the Area there were no outstanding developments in this field but progress was made extending, and improving existing supplies.

As far as sewage disposal was concerned, although many schemes were prepared, and sent forward for approval very little was done in the actual construction of sewage disposal plants on any scale. The great need for better sewage disposal is widespread and although the Ministry concerned agrees in principal with the need for such schemes, it is not possible in the national interest to allow unrestricted work to take place on all schemes put forward not only in this Area but throughout the whole country. Thus whilst members, and officials of District Councils may be anxious to see rapid progress in the provision of proper sewage disposal arrangements, we must necessarily accept the restraints imposed by the Central Government.

I would not wish to close this preface without expressing my sincere thanks to the members, and officers of District Councils from whom I have at all times received assistance, and encouragement in carrying out my duties during the year 1954. I trust that I may count on their continued co-operation for as long as it is my privilege to serve the interests of Public Health in this Area.

I have the honour to be
Mr. Chairman, Ladies and Gentlemen,
Your obedient Servant,

(Signed)

P. J. FOX

Medical Officer of Health.

ST. GERMAN'S RURAL DISTRICT.

Public Health, Housing and Planning Committee.

Councillor E.R. Underhill - Chairman.

Councillor F. Elworthy - Vice-Chairman.

together with all remaining Members of the Council.
This Committee meets once a month and deals with
all matters related to Public Health.

Public Health Officers of the Authority.

Dr.P.J.Fox, M.B., B.Ch., B.A.O., D.P.H.,
Medical Officer of Health.

W.E.Grylls, M.R.S.I. - Chief Sanitary Inspector.

R.L.Williams, M.R.S.I. - Sanitary Inspector.

D.W.Sillifant, A.R.S.I. - Additional Sanitary Inspector.

ST. GERMANS RURAL DISTRICT.

Area of Rural District	48,433 acres
Population (Registrar-Generals Estimate)	16,229
Number of Inhabited Houses	5,521
Rateable Value of Rural District	£65,019. 10s. -d.
Product of Penny Rate.	£264. 2s. 3d.

Vital Statistics for 1954

	<u>Male</u>	<u>Female</u>	<u>Total</u>
Live Births	125	102	227
	<u>St.Germans R.D.</u>	<u>Health Area No.7.</u>	<u>England & Wales.</u>
Birth rate per 1000 of population	16.5	15.5	15.2
	<u>Male</u>	<u>Female</u>	<u>Total</u>
Still births	5	2	7
	<u>St.Germans R.D.</u>	<u>Health Area No.7.</u>	<u>England & Wales.</u>
Still birth rate per 1000 total births	29.9	25.0	24.0
	<u>Male</u>	<u>Female</u>	<u>Total</u>
Deaths	124	91	215
	<u>St.Germans R.D.</u>	<u>Health Area No.7.</u>	<u>England & Wales.</u>
Death rate per 1000 of population	11.0	11.4	11.3
Maternal deaths	None registered		
	<u>Male</u>	<u>Female</u>	<u>Total</u>
Deaths of infants under one year of age	1	3	4
	<u>St.Germans R.D.</u>	<u>Health Area No.7.</u>	<u>England & Wales.</u>
Infant mortality rate per 100 live births	17.6	18.5	25.5

Principal Causes of Death at All Ages.

Heart disease	70
Cancer (all sites)	46
Vascular lesions of the nervous system ("stroke")	21
Respiratory disease	15
Circulatory disease	14
Genito-urinary disease	7
Accidents	7
Digestive disease	3

Average Age at Death.

<u>Males</u>	<u>Females</u>
67	69

In the foregoing statistics there is nothing which calls for special comment. Birth rate and death rate both show some increase over last years rates. The infant mortality rate shows a small reduction on

last years figure, and is appreciably below the national rate. For the second successive year there were no maternal deaths. The average age at death showed a small reduction from 69 years to 67 years for males, and a small increase from 66 years to 69 years for females as compared with 1953. Deaths from heart disease, cancer and "strokes" were more numerous than in the previous year.

Infectious Disease.

The total of 223 cases notified in 1954 was considerably lower than the figure of 528 cases in 1953. Apart from whooping cough which was prevalent to the extent of 190 cases, other infectious diseases were not numerous. One case only of a serious infectious disease - paralytic poliomyelitis - was notified. Whooping cough casued the death of one infant during the year.

The following are details of actual numbers, and case rates of infectious disease notified to me during 1954:-

<u>Rates per 1000 of population.</u>			
<u>Disease</u>	<u>Actual Cases.</u>	<u>St. Germans R.D.</u>	<u>Health Area No.7.</u>
Whooping cough	190	11.71	9.54
Scarlet fever	12	0.74	0.42
Pneumonia	12	0.74	1.08
Measles	2	0.12	1.13
Erysipelas	2	0.12	0.13
Paralytic poliomyelitis	1	0.06	0.04
Acute rheumatism	1	0.06	0.06

<u>Rate per 1000 total births.</u>			
	<u>Actual Cases.</u>	<u>St. Germans R.D.</u>	<u>Health Area No.7.</u>
Puerperal pyrexia	2	8.67	5.56

Tuberculosis.

After last years depressing total of 24 new cases of tuberculosis, it is pleasant to be able to report that in 1954 the situation took a marked turn for the better, and 5 new cases only of tuberculosis were notified in the Rural District. All five were cases of respiratory tuberculosis, and all affected were adults between the ages of 15 and 65 years. There was one death from respiratory tuberculosis.

The following are details of new cases, deaths, case rates, and mortality rates during 1954 :-

<u>Age Group</u>	<u>New Cases</u>		<u>Deaths</u>	
	<u>M</u>	<u>F</u>	<u>M</u>	<u>F</u>
0 - 1	-	-	-	-
1 - 5	-	-	-	-
5 - 15	-	-	-	-
15 - 45	2	1	-	1
45 - 65	2	-	-	-
65 and over	-	-	-	-

<u>Rates per 1000 of population.</u>		
	<u>St. Germans R.D.</u>	<u>Health Area No.7.</u>
New cases	0.31	0.75
All cases	6.41	6.73
Deaths	0.06	0.08

At the end of 1954 there were 86 cases of respiratory tuberculosis and 18 cases of non-respiratory tuberculosis known to be residing in the Rural District.

National Assistance Act, 1948.

No action under Section 47 of this Act was called for during 1954.

Water Supply.

With piped water available in almost 90% of dwelling houses in the Rural District, problems of providing adequate, and wholesome water are virtually non-existent. Because of the wet, sunless summer no difficulty in maintaining adequate supplies was encountered, although where old encrusted distribution mains were in use leakages, and low pressure were at times troublesome. The quality of water, the bulk of which came from the South East Cornwall Water Boards reservoir, was generally good throughout the year.

Sewerage and Sewage Disposal.

Apart from the completion of the scheme at Quethiock and the completion of that section of the St. Germans village scheme which operates by gravity, I regret that I cannot report much progress in this important matter as it applies to other parts of the Rural District. There seems little prospect of work on the large scheme at Callington commencing before 1956 at the earliest. Whilst it is only right and proper that all concerned in the future planning, and development of a locality should be consulted in advance, such consultations necessarily slow down the preparation of sewage disposal schemes. Moreover in the interests of our national economy the Government has to apply some curb on such schemes. Thus even when all preliminary difficulties have been overcome, and the scheme has been finalised, and sent forward for approval it may have to "stand in the queue" for some time before its turn to be approved is reached.

Meat, Milk and Other Foods.

The derationing of meat and the relinquishment of Ministry control over the slaughtering of meat which took effect in July, 1954, was a development which, though not unexpected caused a certain amount of anxiety. Prior to 1940 large numbers of slaughterhouses existed at widely scattered points throughout this Rural District. To adequately supervise the hygiene, and general conduct of these places, and more important to properly inspect all meat killed in them is a task of considerable magnitude. If all these slaughterhouses had applied for licences to reopen it would have been necessary to employ at least one additional Sanitary Inspector suitably qualified to cope with the extra work of meat inspection and slaughterhouse supervision. Fortunately, for one reason or another, only three applications for the re-opening of slaughterhouses at Callington, Gunnislake and Landrake were approved, and the existing establishment of Sanitary Inspectors has been able to cope with the additional work arising therefrom.

Regular inspections of premises in which food is handled have continued during the year.

Food Poisoning.

No cases of food poisoning were notified during the year.

Clean Food Campaigns.

No such campaigns were undertaken during the year.

Housing.

Good progress in the building of new houses was made during 1954, when 36 Council houses, and 25 private enterprise houses were completed. At the end of the year the total number of new Council houses built since the war was 394, whilst 110 private enterprise houses were completed in the same period. In addition, through the medium of Grant Aid under the Housing Act, 1949, many older but sound dwellinghouses are being improved by the addition of extra rooms, bathrooms and lavatories, kitchens, sculleries etc. and are by this means given a new lease of life, and made capable of providing decent living accommodation at a much lower cost than new houses.

Now that the large scale demand of the immediate post-war years for rehousing has slackened somewhat, many older people who have been living without great complaint in unhealthy, sub-standard dwellings have been coming to our attention. In a great many cases these old houses have for various reasons, not the least of which is the low restricted rent, fallen into such a state of disrepair that the only satisfactory means of dealing with them is by demolition or closing. Apart from the difficulty of actually building houses to receive tenants displaced from these condemned properties, one is also faced with the reluctance or inability of the tenants to pay the higher rent of the new house provided to house them.

As one might expect in a rural area there is no great concentration of slum property requiring large scale clearance proposals. It is true that in some of the larger centres of population e.g. Callington, Gunnislake, Calstock and Millbrook the concentration of old unfit houses will call for consideration of "Clearance Areas". In this connection it is worth remembering that as few as two houses may constitute a "Clearance Area". On the other hand it is likely that many old properties will be dealt with as individual unfit houses. As the inspection and assessment of properties which may fall to be dealt with under slum clearance procedure commenced only towards the end of 1954, it is too early yet to make any useful comment on this matter.

Factories Act 1937 and 1948.

No difficulties in operating the provisions of these Acts were experienced during 1954.

Report of Sanitary Inspector.

This report prepared by Mr.W.E.Grylls M.R.S.I., with the assistance of Mr.R.L.Williams M.R.S.I. and Mr.D.W.Sillifant A.R.S.I. follows. I should like to take this opportunity of placing on record my sincere appreciation of the willing help always given me by these three Officers during the year.

ST. GERMAN'S RURAL DISTRICT COUNCIL.

SANITARY INSPECTOR'S REPORT.

YEAR 1954.

WATER SUPPLY:

During the year careful attention has again been given to the District's extensive water undertaking, details of which have been given in previous reports, and out of some 6,100 houses in the District only about 700 are not connected to the Council's Mains, although over 100 of these obtain a piped water supply from the Kelly Bray Water Company. Further applications for a supply from the Mains are being regularly received, however, and Trade and Agricultural requirements are increasing. Eighty-seven further connections were made during the year, forty-three for domestic purposes, twenty-nine for trade, and fifteen for combined trade and domestic needs. It is reasonable to anticipate that all properties which can be served will enjoy the benefits of a Mains Water Supply within the next few years.

Further progress has been made at Callington by the renewal of some 892 yards of Watermains, leaving about the same amount to be dealt with under the Renewal Scheme approved by the Ministry of Housing and Local Government in 1952.

In addition, other Schemes have been undertaken as follows :-

- (a) Extension of 3" Main at Dupath Road, Callington, for a distance of 848 yards to supply a very badly watered area, including one farm and five other properties.
- (b) Extension of 3" Main at Tavistock Road, Callington, for a distance of some 550 yards to afford a supply to seven new bungalows erected during the year, and other premises not previously supplied.
- (c) Main renewals totalling some 320 yards of 3" Main at St. Germans (100 yards), Kingsand (125 yards), Gunnislake (40 yards), and Chilsworthy (55 yards), to replace old and worn out Mains.

In order to maintain more efficient control over the system a further full-time Plumber equipped with Morris Minor Van was taken on and this has resulted in the whole of the Undertaking being maintained by a full-time staff centred at Calstock, Callington and Millbrook, to supervise the whole area, which for convenience sake is worked as three divisions from these centres.

The total quantity of water supplied daily has now reached a figure of some 500,000 gallons per day and the annual income from water supplies is £9,550 approximately.

SEWERAGE AND SEWAGE DISPOSAL:

A further step towards the completion of the Callington Sewerage Scheme was realised during the year, when following a visit by one of the Ministry's Engineering Inspectors and subsequent consultations at the Ministry, the layout of all the sewer lines was approved and authority obtained to commence work on renewals to the value of £3,006. 7s. -d. by direct labour, in Lower Street, Well Street and Back Lane. Certain modifications to the Outfall Works were suggested and incorporated in the final plans which, it is hoped, will receive Ministry approval to go to tender during the coming year.

The gravitational part of the St. Germans Sewerage Scheme, together with the Outfall Works, have been completed and most of the properties to be served by this part have now been connected up. A tender has been accepted for the second part of the Village Scheme incorporating the Pumping Plant and Rising Main and it is hoped that this will be completed within the next twelve months.

The Quethiock Village Sewerage Scheme and Outfall Works has been finished and practically all the properties connected thereto, thus obviating the continued use of the very primitive methods previously employed there.

Improvements to existing Sewer Outfalls were effected at Antony, where the Outfall Works effluent was piped some 554 yards direct to a tidal outfall; at Pillaton, where the effluent was piped some 40 yards to facilitate more efficient broad irrigation of the effluent, and at Cawsand, where the Criterion Tidal Outfall Sewer was renewed for a distance of some 50 yards thus preventing further nuisance on the foreshore.

As envisaged in last year's report, the Council, cognisant of the need, decided to purchase a Cesspool Emptying Machine and tenders were invited in October, and it is hoped that the vehicle will become available early in the New Year.

Late in the year (November 26th), very serious flooding occurred at Gunnislake, and what might have been a major catastrophe was only just averted. Torrential rain surcharged the sewers and this coupled with the peculiar topography of the neighbourhood, caused sudden and severe flooding in the heart of the Village and many properties were seriously damaged. The Chairman of the Council launched a successful Appeal Fund for the victims and £410. 18s. 8d. was raised to help the unfortunate ratepayers concerned. This problem, however, is one which calls for the co-operation and indulgence of several Bodies and it is to be sincerely hoped that they will have agreed on and implemented a Scheme of prevention before next winter threatens.

REFUSE COLLECTION AND DISPOSAL:

Reorganisation of personnel in the Southern half of the District improved the economy without impairing the efficiency of this service during the year. Weekly collections were made available in the Kingsand, Cawsand and Millbrook areas and the conduct and maintenance of the Council's two Tips at Callington and Millbrook was satisfactory.

PUBLIC CONVENIENCES:

The new Public Convenience at Portwrinkle came into use during the year and has fulfilled a useful and long needed want at this increasingly popular seaside resort. There appears to be an increasing public demand for this necessity at all the popular and populated areas of the District and it is reasonable to expect that this need will have to be met in most localities throughout the District within a much shorter period than at one time seemed likely.

HOUSING:

Not unnaturally, freed from restrictions, private enterprise is now playing a major part in the provision of new houses, and during the year 25 new private enterprise houses were completed and occupied, whilst there were 17 under construction at the end of the year under review. The total erected since the War is 110.

More and more use of the Grant Aid under the provisions of the Housing Act, 1949, has been made and improvements have been effected to 20 premises. Additional accommodation has been likewise provided by conversions yielding 2 extra units of accommodation.

As the provisions of the 1949 Act have become more widely known and understood, applications for Grant Aid have increased and many houses have undoubtedly been given a new lease of life by this means, to the general benefit of the area. The Council has wisely encouraged owners to make use of the facilities offered and the costly expense of building new Council houses have been reduced to a minimum by providing alternative accommodation in this manner.

It was anticipated that, with the coming into operation of the Housing Repairs and Rents Act, 1954, on 30th August, that there would be unlimited applications for "Certificates of Disrepair" but the initial interest created soon waned and housing inspections within this category have been very few.

The Council's housing record for the year shows that:-

(a) the number of new Council houses completed was	36
(b) the number under construction at 31st December, 1954, was	8
(c) the number approved but not commenced was	8

The total number of Council houses completed since the War is 394, which together with the 130 Pre-War houses gives an overall figure of 524.

Under Section 1 of the Housing Repairs and Rents Act, 1954, an obligation has been imposed on the Council to survey the existing housing accommodation within the area and submit proposals to the Minister for dealing with those houses which appear to be unfit for human habitation. In consequence, certain areas have now been surveyed and it will be most interesting to see the final results which will have been compiled by Mid-1955. To date, it is apparent that in certain areas, there are many sub-standard properties and the method of dealing with these will require a thoughtful and resolute policy by the Council.

The general housing situation during the year is best summarised as follows :-

Clearance Areas (Housing Act, 1936).

Number of dwellinghouses demolished in the period.		Number of persons displaced.
Unfit houses	Other houses	
N i l	N i l	N i l

Houses not included in Clearance Areas

	Number of Houses	Number of persons displaced
<u>DEMOLITION AND CLOSING ORDERS</u>		
<u>Housing Act, 1936.</u>		
(a) Houses demolished as a result of formal or informal procedure under Section 11	N i l	N i l
(b) Houses closed in pursuance of an undertaking given by the owners under Section 11, and still in force	8	24
(c) Parts of buildings closed (Section 12)	N i l	N i l
<u>Housing Act, 1949.</u>		
(a) Closing Orders made under Section 3(1)	N i l	N i l
(b) Demolition orders determined and closing Orders substituted under Section 3(2)	N i l	N i l
<u>Local Government (Miscellaneous Provisions) Act, 1953.</u>		
Closing Orders made under Section 10(1)	N i l	N i l

Number of
Houses

REPAIRS

Informal Action

Number of unfit or defective houses rendered fit during the period as a result of informal action by the local authority under the Public Health or Housing Acts 120

Action under Statutory Powers

Public Health Acts

Number of houses in which defects were remedied after service of formal notices

(a) by owners N i l

(b) by local authority in default of owners N i l

Housing Act, 1936.

Number of houses made fit after service of formal notices (Sections 9, 10, 11 and 16)

(a) by owners 2

(b) by local authority in default of owners N i l

MEAT AND OTHER FOODS:

The most important development during the year was the relaxation of control over slaughtering and the advent once more of private slaughtering within the District. Realising the implications of this innovation, more especially in a scattered rural area such as this, the Council wisely set up a Sub-Committee to consider the policy which should be adopted in the area, and, in consultation with the butchers and farmers, formulated a scheme of operation to serve the District, having due regard to the declared Government long-term policy. Consequently, three private slaughterhouses were licensed at Gunnislake, Callington and Landrake,

from which centres the needs of the area could be reasonably met consistent with efficient supervision and inspection. It is pleasing to report that the fullest co-operation has been received from the traders and the slaughtering and inspection arrangements have worked smoothly with efficient liaison and goodwill on all sides.

From July, when private slaughtering commenced, to the end of the year, the inspection details are as follows :-

	<u>Cattle</u>	<u>Calves</u>	<u>Sheep</u>	<u>Pigs</u>
Number of carcasses inspected	137	7	390	195
Condemnations:	3 bovine carcasses - generalised T.B.			
	6 " lungs - T.B.			
	4 " heads - T.B.			
	2 " heads - actinomycosis.			
	1 forequarter of beef - severe bruising.			
	5 pigs heads - T.B.			
	1 pig - Septicaemia			
	1 sheep - fever.			

In addition, a proportion of offal has been rejected, chiefly bovine livers, unfit because of cirrhosis, necrosis, abscesses, telangiectiasis, etc.

During October, meat inspection duties were also carried out on behalf of the Saltash Borough Council in the absence of their Meat Inspector, emphasising the close harmony which exists between the two neighbouring Authorities.

Inspection of other foodstuffs throughout the year resulted in the voluntary surrender and condemnation of :-

5 lbs. tinned Brisket of beef.
 28 lbs. corned beef.
 25½ lbs. tinned meat.
 26 lbs. cheese
 66 tins tinned fruit.

Shops and other Food premises have been regularly visited and found to be well maintained, and to statutory action has been necessary.

APPENDIX 1.

PRINCIPAL CAUSES OF DEATH - ALL AGES - 1954.

DISEASE	ST.GERMANS	LISKEARD	SALTASH	TORPOINT	LISKEARD	LOOE	HEALTH
	R.D.	R.D.	M.B.	U.D.	M.B.	U.D.	AREA NO. 7.
Heart disease	70	76	29	16	66	25	282
Cancer (all sites)	46	26	18	10	12	13	125
Vascular lesions of the nervous system ("stroke")	21	20	21	8	19	2	91
Respiratory disease	15	18	7	2	3	2	47
Circulatory disease	14	6	6	2	4	2	34
Genito-urinary disease	7	1	6	3	-	3	20
Accidents	7	2	6	-	2	3	20
Digestive disease	3	3	3	1	-	-	10
Suicide	1	2	1	-	1	1	6

APPENDIX 2.

TYPES OF HEART DISEASE AND CANCER CAUSING DEATH - 1954.

TYPE OF DISEASE	ST.GERMANS	LISKEARD	SALTASH	TORPOINT	LISKEARD	LOOE	HEALTH
	R.D.	R.D.	M.B.	U.D.	M.B.	U.D.	AREA NO. 7.
Coronary disease, angina	26	25	10	8	5	8	82
High blood pressure with heart disease	7	3	2	3	8	-	23
Other heart disease	37	48	17	5	53	17	177
Cancer of stomach	13	6	2	2	1	4	28
Cancer of breast	3	3	4	1	2	1	14
Cancer of lung and bronchus	4	3	2	1	2	1	13
Cancer of womb	-	2	-	-	1	-	3
Other cancers	26	12	10	6	6	7	67

APPENDIX 3.

DEATHS BY AGE GROUPS - 1954.

DISTRICT	0 - 5 YEARS	5 - 15 YEARS.	15 - 45 YEARS	45 - 65 YEARS	65 - 75 YEARS	75 YEARS AND OVER	ALL AGES
ST.GERMANS R.D.	4	3	13	43	65	87	215
LISKEARD R.D.	3	1	3	34	50	72	163
SALTASH M.B.	5	1	3	29	27	40	105
TORPOINT U.D.	-	-	4	8	16	17	45
LISKEARD M.B.	-	-	-	12	29	74	115
LOOE U.D.	2	-	1	11	12	28	54
HEALTH AREA NO. 7.	14	5	24	137	199	318	697

APPENDIX 4.

AVERAGE AGE AT DEATH - 1954.

DISTRICT	MALES	FEMALES.
ST.GERMANS R.D.	67	69
LISKEARD R.D.	63	71
SALTASH M.B.	61	72
TORPOINT U.D.	68	70
LISKEARD M.B.	76	79
LOOE U.D.	63	74
HEALTH AREA NO.7.	66	73

APPENDIX 5.

TUBERCULOSIS
NEW CASES AND DEATHS IN HEALTH AREA NO.7 - 1954.

AGE GROUP	NEW CASES		DEATHS	
	M	F	M	F
0 - 1 YEAR	-	-	-	-
1 - 5 YEARS	1	-	-	-
5 - 15 YEARS	3	2	-	-
15 - 45 YEARS	11	9	1	1
45 - 65 YEARS	8	3	-	-
65 YEARS AND OVER	1	1	2	-
TOTALS	24	15	3	1

	MALES	FEMALES
CASE RATE PER 1000 OF POPULATION	0.46	0.29
MORTALITY RATE PER 1000 OF POPULATION	0.06	0.02

CASE RATES AND MORTALITY RATES PER 1000 OF POPULATION
IN THE SIX COUNTY DISTRICTS IN HEALTH AREA NO.7 - 1954.

DISTRICT	NEW CASES	TOTAL CASES AS AT 31.12.54.	DEATHS
ST.GERMANS R.D.	0.31	6.41	0.06
LISKEARD R.D.	1.07	5.91	-
SALTASH M.B.	0.40	6.55	0.13
TORPOINT U.D.	0.97	7.41	-
LISKEARD M.B.	1.38	10.09	0.23
LOOE U.D.	1.09	6.54	0.27
HEALTH AREA NO.7.	0.75	6.73	0.08

APPENDIX NO.6.

DEATHS BY SEXES FROM CANCER OF LUNG AND BRONCHUS IN
THE FIVE YEAR PERIOD 1950 - 1954.

YEAR	ST.GERMANS R.D.	LISKEARD R.D.	SALTASH M.B.	TORPOINT U.D.	LISKEARD M.B.	LOOE U.D.	HEALTH AREA NO. 7.
1950	M.1	M.2	M.1	NIL	M.2	M.1	M.7 F.NIL
1951	M.3	M.2	M.1	NIL	F.2	F.1	M.6 F.3
1952	NIL	NIL	M.1	F.1	F.1	M.1	M.2 F.2
1953	M.7 F.1	M.2 F.1	NIL	F.1	NIL	M.1	M.10 F.3
1954	M.3 F.1	M.1 F.2	M.2	M.1	M.1 F.1	M.1	M.9 F.4
MALES	14	7	5	1	3	M.4	MALES 34
TOTALS FEMALES	2	3	-	2	4	F.1	FEMALES 12

APPENDIX 7.

DEATH RATES PER 1000 OF POPULATION FOR CANCER OF
LUNG AND BRONCHUS 1950 - 1954.

YEAR	HEALTH AREA NO.7.	CORNWALL COUNTY	ENGLAND AND WALES
1950	0.13	0.18	0.28
1951	0.17	0.22	0.30
1952	0.08	0.21	0.32
1953	0.24	0.22	0.34
1954	0.25	0.27	0.40

